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FAX TRANSMISSION

DATE: December 19, 2008

PTO IDENTIFIER: Application Number 10/762,421
Patent Number

Inventor: Ashton et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: ROPES & GRAY LLP
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Attorney Dkt. #: CDSI-P01-040

PAGES (Including Cover Sheet): 4

CONTENTS: Fee Transmittal (1 page)
Four Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Request for Continued Examination Transmittal (1 page)
Charge \$2,540.00 to deposit account 18-1945

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1002/004

DEC 19 2008

PTC/SB/17 (10-08)

Approved for use through 06/30/2010. OMB 0851-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004

Fees pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4916).

FEE TRANSMITTAL

For FY 2009

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(5) 2,540.00
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Complete If Known

Application Number	10/762,421
Filing Date	January 22, 2004
First Named Inventor	Paul Ashton
Examiner Name	Sasan, Aradhana
Art Unit	1615
Attorney Docket No.	CDSI-P01-040

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 18-1945 Deposit Account Name: Ropes & Gray LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under .37 C.F.R. 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissuc	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)
Each independent claim over 3 (including Reissues)
Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
				<u>Fee (\$)</u> <u>Fee Paid (\$)</u>
1	1	1	1	1
2	2	2	2	2
3	3	3	3	3
4	4	4	4	4
5	5	5	5	5
6	6	6	6	6
7	7	7	7	7
8	8	8	8	8
9	9	9	9	9
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85	85	85	85	85
86				

_____ - or HP = _____ x _____

Indep. Claims	Extra Claims	Fee (\$)
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3	0	200
4	0	250
5	0	300
6	0	350
7	0	400
8	0	450
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119	0	6000
120	0	6050
121	0	6100
122	0	6150
123	0	6200
124	0	6250
125	0	6300
126	0	6350
127	0	

HP = highest number of independent claims paid for, if greater than 3.


3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)		
Other (e.g., late filing surcharge):	1254 Extension for response within fourth month	1,730.00
	1801 Request for continued examination (RCE) (see 37 ...	810.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	44,735 Telephone (617) 951-7615
Name (Print/Type)	David P. Halstead, J.D., Ph.D.		Date December 18, 2008

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

Dated: December 19, 2008

Signature: Pamela A. Harrison (Pamela A. Harrison)